



#3

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number PB-9907

First Named Inventor Bhan

COMPLETE IF KNOWN

Application Number 09 / 498,773

Filing Date 5-Feb-2000

Group Art Unit To be assigned

Examiner Name To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method for Deprotecting Oligonucleotides

the specification of which (Title of the Invention)

☐ is attached hereto
OR☒ was filed on (MM/DD/YYYY) 02/05/2000 as United States Application Number or PCT International

Application Number 09/498,773 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/118,575	02/05/1999	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/01A attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact with the Patent and Trademark Office connected therewith: ☒ Customer Number **22840** OR ☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number **22840** OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname					
Anila		Bhan					
Inventor's Signature				Date			
Residence: City	Belle Mead	State	NJ	Country		Citizenship	USA
Post Office Address	26 Hills Drive						
Post Office Address							
City	Belle Mead	State	NJ	ZIP	08502	Country	USA

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



Please type a plus sign (+) inside this box → ☐

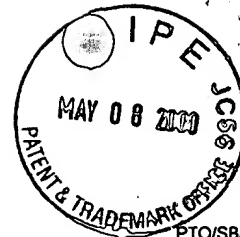
PTO/SB/02A (3-97)
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Lars				Holmberg			
Inventor's Signature	<i>Lars Holmberg</i>			Date	4/25/00		
Residence: City	Whitefish Bay	State	WI	Country	USA	Citizenship	Sweden
Post Office Address 5015 North Woodburn Street							
Post Office Address							
City	Whitefish Bay	State	WI	ZIP	53217	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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the specification of which (Title of the Invention)

☐ is attached hereto
OR☒ was filed on (MM/DD/YYYY) 02/05/2000 as United States Application Number or PCT International

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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60/118,575	02/05/1999	

(Page 1 of 2)

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U.S. Parent Application or PCT Parent
Number

Parent Filing Date
(MM/DD/YYYY)

Parent Patent Number
(if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02A attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact business with the Patent and Trademark Office connected therewith:

☒ Customer Number 22840

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number in this box
22840

Name

Registration
Number

Name

Registration
Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number
or Bar Code Label 22840

OR ☐ Correspondence address below

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Anila

Bhan

Inventor's
Signature

Anila Bhan

Date

4/24/2000

Residence: City

Belle Mead

State

NJ

Country

Citizenship

USA

Post Office Address

26 Hills Drive

Post Office Address

City

Belle Mead

State

NJ

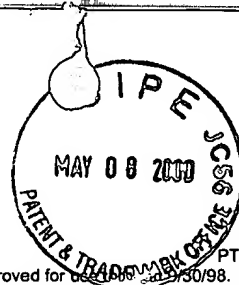
ZIP

08502

Country

USA

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



Please type a plus sign (+) inside this box → ☐

Approved for use by PTO/SB/02A (3-97)
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
OMB 0651-0032

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Lars		Holmberg	
Inventor's Signature			Date
Residence: City	Whitefish Bay	State	WI
		Country	USA
Post Office Address	5015 North Woodburn Street		
Post Office Address			
City	Whitefish Bay	State	WI
		ZIP	53217
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City		State	
		Country	
Post Office Address			
Post Office Address			
City		State	
		ZIP	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City		State	
		Country	
Post Office Address			
Post Office Address			
City		State	
		ZIP	
		Country	

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RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Anila Bahn
Lars Holmberg

2. Name and address of receiving party(ies):

Name: Amersham Pharmacia Biotech, Inc.

Internal Address: _____

Additional names(s) of conveying party(ies)

☐ Yes ☒ No

3. Nature of conveyance:

☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Other _____Street Address: 800 Centennial AvenueCity: Piscataway State: NJ ZIP: 08855Execution Date: April 25, 2000Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application number(s) or registration numbers(s):

If this document is being filed together with a new application, the execution date of the application is: _____

A. Patent Application No.(s)

09/498,773

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Victoria M. MaliaInternal Address: Amersham Pharmacia Biotech, Inc.Street Address: 800 Centennial AvenueCity: Piscataway State: NJ ZIP: 08855

6. Total number of applications and patents involved:

1

7. Total fee (37 CFR 3.41):.....\$ 40.00☐ Enclosed - Any excess or insufficiency should be credited or debited to deposit account☒ Authorized to be charged to deposit account

8. Deposit account number:

500-588

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Victoria M. Malia

Name of Person Signing

Victoria M. Malia

Signature

May 1, 2000

Date

Total number of pages including cover sheet, attachments, and document:

5

CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)Applicant(s): **Anila Bahn and Lars Holmberg**

Docket No.

PB-9907

Serial No.

09/498,773

Filing Date

February 5, 2000

Examiner

To be assigned

Group Art Unit

To be assignedInvention: **Method for Deprotecting Oligonucleotides**

I hereby certify that this **recordation form with copy and 2 assignments**
(Identify type of correspondence)

is being deposited with the United States Postal Service as first class mail in an envelope addressed to: The
Assistant Commissioner for Patents, Washington, D.C. 20231 on **May 1, 2000**
(Date)

Melissa Leck

(Typed or Printed Name of Person Mailing Correspondence)


(Signature of Person Mailing Correspondence)

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ASSIGNMENT OF APPLICATION

Docket Number (Optional)

PB-9907

Whereas, I, Anila Bahn of 26 Hills Drive
Belle Mead, N.J. 08502, hereafter
referred to as applicant, have invented certain new and useful improvements in Method for Deprotecting Oligonucleotides

☒ for which an application for a United States Patent was filed on 5 February 2000,
Application Number 09 / 498,773.

☐ for which an application for a United States Patent was executed on _____, and

Whereas, Amersham Pharmacia Biotech, Inc. of USA herein referred to
"assignee" whose post office address is 800 Centennial Avenue
Piscataway, N.J. 08855 is de-
sirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of one dollars (\$ 1.00), the receipt whereof is ac-
knowledgeed, and other good and valuable consideration, I, the applicant, by these presents do sell, assign
and transfer unto said assignee the full and exclusive right to the said invention in the United States and the
entire right, title and interest in and to any and all Patents which may be granted therefor in the United States,
I hereby authorize and request the Commissioner of Patents and Trademarks to issue said United States
Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof;
and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may
be granted, as fully and entirely as the same would have been held by me had this assignment and sale not
been made.

Executed this 24th day of April, 19 2000
at 800 Centennial Ave. Piscataway, NJ, 08855

Anila Bahn
(Signature)

State of _____) SS:
County of _____)

Before me personally appeared said _____
and acknowledged the foregoing instrument to be his free act and deed this _____
day of _____, 19____.

Seal

(Notary Public)

PTO/SB/15 (8-98)

Approved for use through 9/30/98. OMB 0651-0027

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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ASSIGNMENT OF APPLICATION

Docket Number (Optional)

PB-9907

5015 North Woodburn Street

Whitefish Bay, WI 53217

Whereas, I, Lars Holmberg of _____, hereafter referred to as applicant, have invented certain new and useful improvements in _____
Method for Deprotecting Oligonucleotides

☒ for which an application for a United States Patent was filed on 5 February 2000
 Application Number 09 / 498,773

☐ for which an application for a United States Patent was executed on _____, and

Whereas, Amersham Pharmacia Biotech, Inc. of USA herein referred to

"assignee" whose post office address is 800 Centennial Avenue
Piscataway, N.J. 08855 is desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of one dollars (\$ 1.00), the receipt whereof is acknowledged, and other good and valuable consideration, I, the applicant, by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire right, title and interest in and to any and all Patents which may be granted therefor in the United States, I hereby authorize and request the Commissioner of Patents and Trademarks to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof; and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 25th day of April 18 2000

at _____

Lars Holmberg
 (Signature)

State of _____ SS:

County of _____

Before me personally appeared said _____
 and acknowledged the foregoing instrument to be his free act and deed this _____
 day of _____, 19____.

Seal

(Notary Public)

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